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JPRS Report

Epidemiology

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Epidemiology

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BAHAMAS

Government Charged With Falsifying Statistics on AIDS

Doctor's Contention

54400010 Nassau *THE TRIBUNE* in English
2 Oct 87 p 1

[Article by Gladstone Thurston: "Doctor Charges Government Deceiving Public on AIDS"]

[Excerpt] A prominent New Providence physician has accused the Government of deceiving the public on the true nature of the Acquired Immune Deficiency Syndrome (AIDS) epidemic in the Bahamas.

Dr Elwood Donaldson said every day new AIDS infected persons are being discovered and, contrary to official statistics, there could be up to 1,500 such persons in the Bahamas.

He said that homosexuals are mainly responsible for the rapid spread of AIDS in the Bahamas.

He challenged Parliament to implement legislation to protect society against the spread of AIDS. One measure he suggested was to quarantine AIDS infected persons.

Dr Donaldson, who has been in private practice for more than 17 years, said women are the "primary bridge" between homosexual men and heterosexual men in the spread of AIDS "and this is especially so in the Bahamas because they go with both homosexual and heterosexual men."

He said the greatest danger to the public comes from those seemingly healthy AIDS-infected persons who can pass on the virus.

"We have not done a random testing to ascertain how many people in fact have the virus and that's what's giving the false sense that we have," said Dr Donaldson.

He said that up to the end of September official statistics state that there are 146 AIDS patients in the Bahamas. But they are those who have passed through the Princess Margaret Hospital. "In the Bahamas I suppose we can say that all the AIDS patients have not passed through the Princess Margaret Hospital," he said. "I would think that there are far more than 146 (AIDS infected persons). Common logic would tell you that we have not catalogued all the AIDS patients. Some may have travelled abroad to be treated."

He said that by multiplying the official figures by 10 one would arrive at an approximation of the true number of persons in the Bahamas infected by the AIDS virus.

"It may even be more," he said, "because of the nature of our society, because we have more closeted people than most places, and because we have more closeted people than most places the multiple may be higher."

If the public were to interview the Chief Medical Officer and persons who work in the lab at the Princess Margaret Hospital, he said, "they would be able to give you the statistics of the positive patients they find weekly. Then you would have some idea.

"The public's interest is not being served by trying to suppress this information," he said. "Every effort ought to be made to inform the people of the Bahamas the great danger posed by this problem, and then whatever preventative measures we take would be heeded more readily."

He charged that people in authority are trying to suppress the true statistics about AIDS in the Bahamas.

"Whatever reason they have to suppress the information would be an erroneous one," he said. "Every day new infected AIDS people are being discovered."

Defense of Government

54400010 Nassau *THE TRIBUNE* in English
3 Oct 87 pp 1, 15

[Article by Lyn Sweeting: "Dr Gomez: 'Statistics on AIDS Is Accurate,' Rebuts Dr Donaldson"]

[Text] Dr Perry Gomez yesterday came to the defence of the Ministry of Health and denied that bogus statistics on the prevalence of HIV infected persons in the Bahamas were being released to the public.

Speaking at the opening of an educational display on Acquired Immune Deficiency Syndrome (AIDS) at the Princess Margaret Hospital, Dr Gomez said the "statistics on AIDS in our country are accurate and reflect the truth. We would not be associated with it otherwise."

Dr Gomez was obviously answering private medical practitioner Dr Elwood Donaldson who has accused the government of deceiving the public on the true nature of the AIDS epidemic in the Bahamas. Health Minister Dr Norman Gay also referred to Dr Donaldson's allegations, and promised to "deal with the misinformation" at a later date.

Dr Herbert Orlander told guests that this country is "presently in the midst of an AIDS epidemic.

"Up to the 3rd of June, 1987, 136 cases of AIDS were confirmed," he said. "But the big question is how many of our people are walking about as healthy carriers of the AIDS virus? How many people will be infected with the AIDS virus entirely because of ignorance?"

"We in public health hold the key to quelling the onslaught of the disease. We advocate prevention, and prevention can only be achieved through education. Eliminating AIDS and other sexually transmitted diseases requires a realistic understanding of sexual behaviour as a normal human impulse. Using this understanding we as health officials must first lead a campaign of efficient education accompanied by careful medical knowledge," Dr Orlander said.

/6662

BANGLADESH

Post-Flood Diarrheal Diseases

54500048 Dhaka *THE BANGLADESH OBSERVER* in English 14 Oct 87 p 7

[Text] Tangail, Oct 12: A total number of thirty-five people lost their lives in diarrheal diseases all over the eleven upazilas of Tangail district during the post-flood period. Besides these, number of five thousand nine hundred and ninety one people were attacked with gastro-intestinal diseases during and after the recent floods according to information received from the control room of the local Civil Surgeon's Office.

Out of the thirty-five people, thirty died of diarrhea and five died of gastro-enteritis. The District Public Health Authority sent 87 Mobile Medical Teams and three Reserved Medical Teams in the affected areas.

Besides these, the Public Health Workers repaired thirty-four thousand four hundred and nine tubewells and also distributed four thousand six hundred water purification tablets in the affected areas under the supervision of Civil Surgeon.

/9738

BENIN

France Donates AIDS Laboratory Equipment
AB071055 Dakar *PANA* in English
1357 GMT 6 Nov 87

[Text] Cotonou, 6 Nov (ABP-BEN/PANA)—France on Friday [6 November] delivered to Benin equipment and materials worth 10 million CFA for the country's proposed reference laboratory for detecting virus of the deadly AIDS disease. The equipment will facilitate the identification of the two common AIDS viruses in West Africa—HIV1 and HIV2.

A French Ministry of Cooperation official, Mr Michel Monfort, said the equipment, which is capable of identifying all sero-positive cases, will be complemented by another consignment of the same value, which includes refrigerators, freezers, distillation machine.

According to the World Health Organization, only three AIDS cases had been identified in Benin, all of them foreigners.

CANADA

AECL Working on Radiation Protection Drug
51200008 Toronto *THE GLOBE AND MAIL* in English 3 Nov 87 p A5

[Article by Geoffrey York: "Drug Lauded as Radiation Protection"]

[Text] Atomic Energy of Canada Ltd. is working on a drug that could protect workers who are over-exposed to radiation during a nuclear accident.

An early form of the drug was offered to the Soviet Union after the accident at the Chernobyl nuclear reactor in 1986, but the Soviet Union decided it did not need the Canadian help.

However, the federal Department of National Defence encouraged AECL to continue its work on the drug and scientists believe there is a significant potential market for it in Canada and other countries.

Abram Petkau, director of the AECL medical biophysics branch at Pinawa, Man., said the drug has already been discussed for possible use at nuclear reactors in Canada.

The drug is based on an enzyme called superoxide dismutase (SOD). The enzyme is found in cells, tissues and organs which are dependent on oxygen.

According to preliminary studies, SOD seems to be useful in reducing the effects of radiation poisoning in humans, Mr Petkau said.

It could be applied before or after a person is exposed to radiation, he said. This might help protect an emergency worker who is sent to clean up a nuclear accident, he said.

Currently, iodine pills are commonly used to protect people from radiation exposure. But the iodine pills are of limited value because they cannot protect the entire body and they cannot counteract some of the effects of radiation.

AECL is developing the new drug in partnership with the Winnipeg Rh Institute, a private, non-profit research company.

"I'm very optimistic about the opportunities," said Albert Friesen, president of the institute. "It should be a very important drug in the future."

AECL and the Winnipeg Rh Institute "would have geared up production" if the Soviet Union had expressed interest in the drug after the Chernobyl accident, Mr Friesen said.

The institute wrote letters to Prime Minister Brian Mulroney and the defence department describing the research on SOD. "They said it sounded very interesting and worthwhile," Mr Friesen said.

If the drug is approved, some health-care centres could stockpile a supply of SOD in case it is needed for nuclear workers, he said.

/09599

Launching of New Hepatitis-B Vaccine Reported

54200008 Ottawa THE OTTAWA CITIZEN in English
23 Oct 87 p C17

[Text] Montreal (CP)—A Montreal research institute and a Belgian pharmaceutical company will launch a new vaccine in the next few weeks against hepatitis-B, a contagious disease carried by 200 million people.

Aurele Beaulnes, president of the Armand Frappier Institute, said at a news conference Thursday he's "hoping to sell 100,000 doses in Canada over the next year."

Such vaccines now available in Canada cost \$120-\$150 a dose, he said, but Energix-B, as the new product is called, will be about 30 percent less.

Unlike previous vaccines obtained from blood plasma, Energix-B is a product of genetic engineering, he said.

Hepatitis-B, is a potentially fatal virus which can cause liver failure or cancer. It is a major health problem in parts of the Third World such as tropical Africa, Southeast Asia and China where it is estimated that between 75 percent and 95 percent of adults are exposed to the virus at some time during their lives.

Beaulnes said 4 to 6 percent of adults in Canada are exposed to hepatitis-B in their lifetime. But some groups run a higher risk of exposure—among them medical, dental and laboratory workers, intravenous drug users, homosexuals, prostitutes and prison inmates.

/12232

Rise Found In Asthma Deaths Among Young People

54200007 Toronto THE GLOBE AND MAIL in English
9 Oct 87 p A3

[Article by Joan Breckenridge]

[Text] Canadian researchers are baffled by a 163 percent rise in asthma deaths among people between the ages of 15 and 34 since the early 1970s, says the co-author of a study recently published in the Canadian Medical Association Journal.

There also has been an inexplicable "150 percent increase in hospital admissions for asthma among children under the age of 15," said Dr Donald Wigle, an epidemiologist at the Laboratory Centre for Disease Control in Ottawa.

The same study, which compares 1970-72 with 1982-84, concludes that the death rate from asthma among all age groups has increased 44 percent for females and 9 percent for males.

"We're most concerned about the increase among people under the age of 35 because, in principle, these deaths are preventable," said Dr Wigle, who is organizing a hospital chart review to see if there are any common factors that could explain these deaths.

Until a planned national study on fatal and near-fatal asthma attacks is launched by the laboratory centre, Dr Wigle said, he could only speculate about why increasing numbers of Canadians are dying from the illness.

"It's possible there are some environmental factors increasing the rate of asthma attacks leading to death," Dr Wigle said. This may include food additives or air-tight office buildings that generate a number of pollutants that can trigger an attack.

An asthma attack occurs when the muscle tissue in the lungs' airways tightens in response to such things as stressor allergic reactions to pollens. Asthmatics use inhalers to spray medication into their mouths to open the constricted airways.

"There's been a large increase in self-treatment through the use of inhalers" in Canada, Dr Wigle said. The active ingredient that opens up the airways acts like adrenaline and can irritate the heart muscle.

In the late 1960s, the United Kingdom has what was considered an epidemic of deaths from asthma. "It was believed some of the deaths came from overuse of inhalers," which led to cardiac arrests, he said.

"We don't have any evidence at all in Canada that the use of these agents has increased asthma deaths," Dr Wigle said. A 1978-79 Canada health Survey found that more than half a million Canadians suffer from asthma.

Delays among asthma sufferers in seeking treatment may also be a contributing factor, he said. The large increase in asthma deaths among women may have something to do with more of them smoking.

Although the prevalence of smoking among men and women aged 25 to 44 declined slightly during the 1970s, the average number of cigarettes smoked each day per smoker increased by more than 50 percent among women between the ages of 24 and 34 from 1969 to 1981, the study said.

In the study, the researchers found a 338 percent increase in asthma deaths among men between the ages of 15 and 24 while the death rate per 100,000 population rose to 32 in 1982-84 from 12 in 1970-72.

Among women between the ages of 15 and 24, the rate of death from asthma per 100,000 population rose to 52 from 18, a 160 percent increase. For women between the ages of 25 and 34, the increase was 148 percent or 34 deaths from 9.

Canada is not alone in having an increasing death rate among asthmatics. In recent years, the United States, the United Kingdom, Denmark, Sweden, New Zealand and Australia have recorded significant increases the study says.

/12232

AIDS Incidence, Anonymous Blood Testing Discussed

1,285 Cases

54200006 Ottawa THE OTTAWA CITIZEN in English
3 Oct 87 p A13

[Article by Janice Middleton]

[Text] Canadian Medical experts said Friday they're not alarmed by a study that shows AIDS antibodies may not show up in tests for up to 14 months after infection.

Scientists had thought that antibodies to the virus develop between 3 and 12 weeks after infection.

"There's no cause for panic," said Dr Alastair Clayton, director general of the newly established Federal Centre for AIDS.

"There are probably very few people who would develop antibodies this late."

But if the new finding is true than it has an impact on the blood collection system," Clayton said.

He said it means there may be "a wider window that what we originally thought" on the time-period AIDS-infected patients, unaware that they are carriers, may donate blood.

He said extensive studies of acquired immunodeficiency syndrome patients indicate "more than 95 percent" develop the antibody within 3 to 12 weeks.

Ken Mews, spokesman for the AIDS Project section of the Red Cross, said the Red Cross relies very heavily on its AIDS blood screening program and "there's no indication that anyone has become infected (through a blood transfusion) since we started the testing."

Mews said he hadn't seen the study, but conceded it might make Red Cross officials screen donors even more stringently. The Red Cross now questions all would-be donors and any blood donated from a high risk donor, homosexuals and intravenous drug users, is used only for research.

The new study by two doctors in Finland and published in the British medical journal LANCET, suggests the antibodies may take far longer to develop in the bloodstream than scientists thought previously.

The study of homosexual men, sponsored by the U.S. National cancer Institute, and conducted by doctors Kai and Minerva Krohn showed evidence of latent infection in 9 of 25 men who did not show positive results on conventional AIDS tests.

"We still don't know how long people are infected with the disease before it appears on tests," NCI researcher Genoveffa Franchini said.

The Canadian Red Cross has been screening blood for antibodies formed in response to AIDS since 1 November 1985.

Clayton said that out of the 1.2 million units of blood donated in the first year of screening, 211 units tested positive. Any blood that tests positive is retested two or more times for absolute confirmation, Clayton said.

As of 28 September, the last day for which statistics are available, there were 1,285 AIDS cases in Canada with 670 deaths reported. The regional health unit has recorded 251 cases with 23 deaths.

Clayton estimates there may be more than 75,000 people across the country infected with the HIV virus, that causes AIDS.

Anonymous Blood Testing Issue

54200006 Vancouver *THE SUN* in English
16 Oct 87 p A18

[Article by Robin Ludlow]

[Text] An ambitious series of national blood "snapshots" is planned for next year by the Federal Centre for AIDS in an effort to determine how many Canadians carry the virus.

But the dilemma facing survey planners is that because the blood samples will be anonymous, there will be no way to notify carriers that they are infected.

"If it's truly anonymous, there's nothing we can do (to inform them)," centre director Dr Alastair Clayton said Thursday.

"But if we don't do this survey, we'll never truly know how many people are infected in the country."

In the proposed national Sero-prevalence Survey, Clayton's lab will test blood samples taken for a variety of reasons in hospitals, labs and REd cross clinics. People cannot legally be tested without their consent, so the samples cannot carry any identifying information beyond age and sex.

Because there are no figures on the number of infected Canadians, Clayton said AIDS experts assume that for each actual AIDS case, there are between 5 and 100 infected carriers.

With 1,308 cases diagnosed in Canada so far, there could be as many as 130,000 AIDS carriers—one in 190 Canadians—many of whom are unaware they are infected and continuing to spread the virus.

Clayton told an AIDS symposium in London, Ontario, this week that more than one third of AIDS-infected people develop the deadly disease within 6 years. But because the virus can lie dormant for years, perhaps for a lifetime, all or most carriers might eventually get AIDS—a potential time bomb for the health-care system.

AIDS antibodies are showing up in about one of every 5,500 blood donations, but Clayton pointed out that blood donors are not representative of all Canadians because most high-risk donors—homosexuals and intravenous drug-users—are screened out before they give blood.

Testing is expected to begin early next year.

/12232

AIDS Incidence, Detection Kit, Cabinet Paper Discussed

Ontario Prison Incidence

54200010 Toronto *THE GLOBE AND MAIL* in English
29 Oct 87 p A3

[Article by Kirk Makin]

[Excerpts] The incidence of AIDS in the prison system has increased dramatically this year, and most provinces are unprepared, an adviser on AIDS to the Ontario Ministry of Correctional Services said yesterday.

About 12 AIDS cases have turned up in Ontario provincial reformatories, with another 12 inmates showing the presence of the AIDS antibody, said Kenneth Lee, a prison guard seconded by the ministry to mount an AIDS education campaign within the system.

Most of the cases occurred this year, Mr. Lee said.

"We now know we have damn near an epidemic on our hands and coming down the road," he said. "We can see the increase in the provincial system. The whole point is to be prepared for it when it comes."

Mr. Lee said in an interview that "a lot of other provinces are seeing a buildup of cases like us, but they are not preparing themselves.

"There is a good possibility they are going to end up eventually...with staff getting infected through ignorance. There is also a fear of inmates being attacked."

He said the federal penitentiary system also is beginning to see a steady increase in AIDS cases.

Mr. Lee and Fred DuCheneau, superintendent of Ontario's Maplehurst Correctional Centre, told a Toronto conference on young offenders that the biggest fear is ignorance and unpreparedness.

Mr. DuCheneau told the panel that when a particularly "obstreperous, miserable" person with AIDS was incarcerated at Maplehurst, he placated his staff by ensuring that the prisoner never left his cell unless a guard with Mace was on hand.

Mr. Lee said the tremendous fear among Ontario correctional staff has been relieved significantly through educational campaigns and protective material.

He and Mr. DuCheneau both said that mandatory AIDS testing would do far more harm than good. For one thing, they said, it breeds a false sense of security since it can take many weeks before the AIDS antibodies show up in an individual.

Two inmates have picked up the disease from needles used for administering tattoos, he added.

Vaccine Testing

54200010 Ottawa *THE OTTAWA CITIZEN in English*
29 Oct 87p A13

[Text] Montreal (CP)—An AIDS vaccine will likely be tested on 60 people across Canada by January, a research symposium on the fatal disease was told Wednesday.

Dr. Peter Gill, director of microbiology with the federal Health and Welfare Department, said the vaccine was first used in Canada when he tested it on 12 rhesus monkeys.

Testing of the vaccine on humans began in the U.S. last month following approval by the U.S. Food and Drug Administration but it is still being reviewed by Canada's Health Protection Branch.

Volunteers chosen will be monogamous men, homosexual and heterosexual, between the ages of 25 and 40, Gill said.

There are unusual problems testing an AIDS vaccine, Gill said.

Any volunteer's blood, if tested, will look as though the person is actually infected with the HIV virus believed to cause AIDS. Volunteers will likely be issued with a special identity card to avoid problems they could encounter from being identified as a virus carrier, he said.

Even if the vaccine proves to be safe and effective, it will take between five and seven years to reach the public, said Frank Volvovitz, president of MicroGeneSys Inc., a company based in New Haven, Conn., which manufactures the vaccine.

So far, there have been a total of 1,323 reported cases of AIDS in Canada including 695 deaths.

It is estimated that between 4,000 and 11,000 Canadians will have AIDS in 1991, said Dr. Norbert Gilmore, chairman of Canada's National Advisory Committee on Aids.

Antibody Detection Kit

54200010 Ottawa *THE OTTAWA CITIZEN in English*
29 Oct 87p A13

[Excerpt] Montreal (CP)—Dr. Drasco Pekovic, a dental researcher, has developed a kit he says will help health institutions detect AIDS antibodies faster and cheaper than now possible.

Pekovic, dental research director at Montreal's Jewish General Hospital, told a news conference Wednesday his technique differs from other current methods in its use of frozen sections of HIV, the virus believed to cause acquired immunodeficiency syndrome.

"Frozen tissue is synonymous with freshness," he said.

Virus material used in most other tests undergoes changes during production that sometimes takes away its ability to pinpoint antibodies, said Pekovic, whose kit is not for home use.

The tests detect antibodies, rather than the AIDS virus itself. People with antibodies are considered to be infected but it is not known how many of them will develop the fatal disease.

Pekovic claimed his kit, which produces results in two hours, is 100 per cent accurate which he said compared with a 10 per cent failure rate for most other AIDS screens.

Intended for use by hospitals, scientific companies and Red Cross societies, the kit will be marketed in about four months by Soficorp Scientific Inc., a fledgling subsidiary of Groupe Soficorp Inc., a Montreal-based holding company. Pekovic owns 20 per cent of Soficorp Scientific.

Insurance Issue

54200010 Ottawa *THE OTTAWA CITIZEN in English*
3 Nov 87p A10

[Article by Robin Ludlow]

[Text] Worried life insurance companies are scurrying for cover from the AIDS time bomb.

As the disease spreads, premature policy payouts increase, throwing calculations out of whack.

It's not a disaster yet but premiums for AIDS carriers and other policyholders could shoot out of sight.

Canadian life insurers predict AIDS will cost them an extra \$2.3 billion in death benefits by 2000, less than six per cent of the \$40 billion they expect to pay out, but still cause for concern.

And that's only on policies now in force, not new ones written between now and then on people who subsequently get AIDS.

Earl Orser, chairman of the 170-member Canadian Life and Health Insurance Association, said in Winnipeg Monday that "prudent measures" by insurers can limit the impact of AIDS.

"This level of claims seems within the range which the insurance system can deal without massive impacts on rates and solvency, provided that insurers take prudent measures to protect themselves," he said.

Those defensive measures include stricter means to detect lying and withholding of information by policyholders and applicants.

The association is also developing guidelines to cover informed written consent for testing, the types of questions that can be included on application forms, procedures for ordering lab tests and maintaining confidentiality of results.

"We must explain at every opportunity that we classify the risk associated with AIDS as we would any other health condition such as cancer or heart disease," Orser said.

An industry survey showed AIDS has been involved in 220 life insurance claims so far, totalling \$12.4 million.

Life insurance companies paid out \$1.7 million before 1986 but that figure tripled to \$5.2 million in 1986. By June of this year, they had already paid out \$5.5 million.

The 1987 figures are believed to be understated because not all companies determine cause of death and some companies did not take part in the survey.

Many insurers now demand AIDS tests for people taking out policies of \$250,000 or more and those who test positive can be rejected.

The companies argue it is no different than turning down someone who has just had a heart attack because the risk is greater.

Insurers are also being stung by policyholders who are entitled to stop paying premiums when they become disabled. AIDS victims are usually incapacitated for about two years before they die.

The association is planning a survey of rising AIDS-related disability costs by the end of the year.

As of Monday, there were 1,326 diagnosed AIDS cases in Canada, up 23 in the past month. Almost 700 of those are already dead.

Blood Unit Tracing

54200010 Toronto *THE GLOBE AND MAIL* in
English 4 Nov 87 p A3

[Article by Heather Mallick]

[Text] The Canadian Red Cross is trying to trace 28 units of blood, possibly tainted with AIDS, that were sent to British Columbia hospitals from 1982 to 1985.

The 28 are all that is still missing from 65 units targeted in a search in July. So far, 37 units have been traced.

All the blood was donated before November of 1985, when the Red Cross began screening all donations.

Dr. Penny Ballem of the Vancouver Red Cross cautioned that the blood may not be tainted.

"But instead of waiting, we wanted to identify people who were at risk."

The blood was donated on several occasions by 23 people, 16 of whom later developed the AIDS antibody. The other seven were found to have engaged in high-risk activities such as sexual intercourse with a person who later developed the antibody.

Of the 37 units accounted for, 10 were discarded and the rest were used in transfusions, exposing three patients to the AIDS virus. One of them died of an unrelated disease.

In all of Canada as of Oct. 5, 60 AIDS cases have been traced to blood transfusions or blood products, according to statistics collected by Ottawa's Laboratory Centre for Disease Control. Of those, 37 resulted in death.

Dr. Ballem said in an interview yesterday there have been nine cases of post-transfusion AIDS in B.C. so far, all from transfusions performed before screening began. "No doubt, there will be other cases..."

Dr. Ballem said 39 other units of blood, possibly tainted with AIDS, were broken down into blood products such as plasma and red blood cells. These were then pooled with thousands of other products and are impossible to trace.

The "look-back" program will continue as more cases appear, she said. "It is a universal program any self-respecting organization would carry out."

The Red Cross is attacking the problem from both sides—searching for donors and recipients who later showed exposure to the AIDS virus.

Dr. Ballem said all 26 B.C. hospitals that received the blood in question have been notified.

"They must determine what happened to the blood, notify the doctor in charge if it was transfused, and the doctor must then try to locate the patient. That all takes time."

She is confident every one of the units will be tracked down.

Dr. Ballem said the Red Cross screening program turns up an infected donor every few months.

"B.C. has one of the lowest rates of sero-positivity—.004 per cent," she said. "The chance of getting AIDS from a blood transfusion is tiny."

Dr. Brian McSheffrey, acting national director of blood services for the Red Cross, said in an interview that more than a million units of blood are collected each year in 17 centres across Canada.

They are almost always used in the province where they are donated, which makes tracing donations a little easier.

Because the Red Cross's computer is not programmed for such searches, much of the job must be done by hand. But because blood cannot be safely stored for more than 35 days, it is possible to narrow down the time when it was transfused.

Alberta Incidence Among Heterosexuals

Windsor THE WINDSOR STAR in English
4 Nov 87p D12

[Text] Edmonton (CP)—A new breakdown of AIDS figures in Alberta reveals for the first time that more heterosexuals are becoming infected with the deadly virus.

As many as 11 people in the province have become infected through sexual contact with a partner of the opposite sex, usually bisexual men, Dr. John Waters, director of communicable disease control, said Monday.

At least six of those stricken are women; details on the other five are not known because of lack of information supplied by the doctor involved.

The number will continue to rise, but probably not as a proportion of total cases, he said.

Before Monday's news there was only one reported case of heterosexual transmission of AIDS in Alberta, and it remains the only instance of the fully-developed disease being passed from a bisexual man to a woman.

But Waters has just completed the first computer breakdown of people testing positive as carriers of the disease.

Those people—and there are 455 of them in the province—have come into contact with AIDS, have developed antibodies to the virus, and are likely infectious to others.

BUT AS YET they have no symptoms of the full disease and are not included in official statistics. About 30 per cent of them will go on to develop full AIDS within five to seven years, Waters said.

"This is the first time we have broken them (heterosexuals) out as a separate group," he added. "The numbers are not important. But what we do have is evidence that AIDS is being spread heterosexually.

"You cannot be complacent because you are heterosexual...if you have sex with a partner you are not sure about or if you have sex with multiple partners you are taking a small risk with a very serious disease."

Although the number of heterosexuals infected is higher than previously known, the study shows the proportion is not out of line with national statistics for the fully developed disease, he said.

Nationwide, 1,326 cases of AIDS have been reported. More than half of the patients—699 people—have died.

Dr. John Gill, a Calgary AIDS specialist and chairman of the Provincial AIDS Advisory Committee, said he isn't surprised by the Alberta figures. He said it's well known the AIDS virus can be spread heterosexually.

THE NEW STATISTICS also show as many as 31 other people—including 10 hemophiliacs—have been exposed to the AIDS virus as a result of blood transfusions or blood products. As many as 11 of those are women.

And while officials believe there are no intravenous drug abusers in Alberta with fully-developed AIDS, statistics show six such drug abusers are carriers of the disease.

Waters said the number of people seeking an AIDS test from their doctor has increased dramatically. Almost 600 Albertans rolled up their sleeves in the last two weeks alone to have their blood tested for the disease.

While more than 2,100 Albertans went for testing in the whole of 1986, statistics show 9,200 people had been tested by mid-September this year. Of those 455 were found to be carrying the AIDS virus.

Cabinet Paper

54200010 Toronto *THE GLOBE AND MAIL* in
English 7 Nov 87 pp A1, A2

[Article by Joan Breckenridge]

[Text] The federal Government is leaning toward approval of mandatory AIDS tests for immigrants, a confidential Cabinet document obtained by *The Globe and Mail* shows.

It also predicts that by 1991 the disease will have cost the health-care system more than \$500-million.

The realization that education is currently the only effective means of controlling the spread of AIDS has prompted Health and Welfare Canada, in a wide-ranging Cabinet memorandum on the disease, to ask that the \$4-million public-education fund be increased by \$52.69-million.

A national AIDS education program to be launched by the spring of 1988 also promises to be controversial. The memorandum says sexually explicit information is necessary because "explicitness is not optional, it is imperative."

The paper urges an increase in the National AIDS Program budget, which includes educational funds, from \$39-million over five years to \$189.3-million over seven years.

A source said Health Minister Jake Epp has approved the memorandum but that it has yet to go to the Cabinet.

In a section of the report entitled "ministerial recommendations," Mr. Epp firmly opposes mandatory AIDS testing for the general public because "the cost of repeatedly surveying the entire population would be prohibitive (up to \$250-million per year)."

However, other options are outlined in the 79-page document, entitled *Preparing Canada For AIDS In The 90s*:

Mandatory testing of immigrants is suggested, either to keep those who test positive for the AIDS antibody out of the country or to at least keep track of them, "to detect any significant change that might signal a policy review." The fact that AIDS patients would not necessarily be excluded from the country would make this option, seen as a compromise, politically attractive. Although the United States has implemented mandatory AIDS testing for immigrants, the consensus among experts is that the move will have little impact.

Hospitals should routinely employ strict infection-control procedures. Before mandatory testing of all hospital patients were implemented, however, all the provinces would have to agree it was warranted.

People who received multiple blood transfusions between 1978 and 1985 should be encouraged to have themselves tested before getting married or pregnant. Compulsory testing, however, would be "discriminatory."

Testing of prisoners should continue on a voluntary basis. Mandatory tests would lead to the isolation of those individuals who test positive, which would amount to "unwarranted restriction." As well, isolation facilities would eventually be overtaxed.

The report, drafted by Health and Welfare officials, says it would be difficult to justify mandatory testing of health-care workers and restaurant employees because there is no evidence of potential risk to patients and customers.

Mr. Epp indicates he would like to see expanded voluntary testing among the general population, as long as three criteria are met: informed consent; pre- and post-test counselling; and confidentiality of test results.

(This is in line with the opinion of international public health experts that compulsory testing does more harm than good, because people who think they have AIDS would simply stay away from doctors, and would be able to take other effective steps to avoid the tests.)

The Health Minister also wants to licence any facility where blood is tested, collected and stored. This would ensure that only the best procedures are followed when blood is tested for the AIDS antibody.

The document states that AIDS will have particularly serious consequences for the native population because their health status is lower than that of other Canadians. Native communities are also isolated and do not have AIDS-testing facilities readily available.

The memorandum urges Health and Welfare Canada to begin addressing many of the difficult legal and sociological questions posed by AIDS, including "sanctions for those knowingly transmitting the disease." Mandatory testing by employers and insurance companies should also be examined, it says.

AIDS, which the report calls "one of the most serious threats to global health in modern times," is expected to become the most common cause of death for Canadian men between the ages of 20 and 39 in the next few years, the report says. As of Oct. 5, 387 men within this age group had died from AIDS. Another 415 men with AIDS are still alive.

Mr. Epp has been under intense pressure from AIDS community groups, researchers, AIDS patients and educators to increase funds for AIDS.

The memorandum indicates that both the Government and Mr. Epp have been harshly and repeatedly criticized over the past few years for avoiding the AIDS issue and for not providing strong leadership.

"The time has come for the federal Government and the Minister of Health and Welfare ... to demonstrate strong and visible leadership on the AIDS issue," the document says.

Disease Control Centre Estimate

54200010 Toronto *THE GLOBE AND MAIL* in
English 10 Nov 87 p A3

[Article by Stephen Strauss]

[Text] It appears the yearly number of new AIDS cases in Canada will soon peak at levels dramatically below scare forecasts of a few years ago, a Government statistician says.

A new analysis of recently decreasing growth rates also suggests that a Cabinet document leaked last week may have overestimated the number of potential Canadian cases in 1991 by as much as 20 per cent.

Readjusting the numbers would translate into a \$100-million saving in the costs of treating the disease.

"We are very close if (we have) not quite hit the flatness in the growth curve," said George Wells, an epidemiologist and biostatistician working for the Laboratory Centre for Disease Control in Ottawa.

If recent trends continue, Mr. Wells suggests, the yearly numbers of new cases will peak next year.

The Cabinet document, which was prepared in August by the Department of Health and Welfare, projected 6,700 total cases by the end of 1991. Mr. Wells' new model cuts this to about 5,300.

Moreover, by 1991 the number of new AIDS cases will have actually begun to decrease, according to the model.

Mr. Wells said his forecast differed from the earlier Health and Welfare document by assuming that "there is an upper limit in the population to be infected."

His analysis supposes that the disease remains, as it has been, overwhelmingly an affliction of homosexual and bisexual men. More than 82 per cent of Canada's current 1,345 people with AIDS fall into this risk category. (Less than 40 have been either drug addicts or heterosexual partners of people engaging in high-risk activities.)

Mr. Wells added that the present insignificance of intravenous drug use victims (six) would make Canada a unique laboratory to test the sexual spread of the disease.

He also cautioned that it will be at least three months before the rapid slowdown that has recently appeared can definitely be confirmed as the plateau.

Relying on U.S. and Canadian data, an even more radical revision of the growth rates has just been put forward by Ian MacNeill, an internationally recognized statistician at the University of Western Ontario.

He has reinterpreted it on the basis of German studies that suggest that half the people with AIDS antibodies in their systems will come down with a fully developed case of the disease after six years.

From this, Prof. MacNeill now predicts that the number of infected but apparently healthy carriers of AIDS is no more than 4,000 in Canada and about 130,000 in the United States.

This contrasts with earlier estimates of 1.5 million to two million AIDS-infected people in the United States and 25,000 to 30,000 in Canada.

Mr. MacNeill said that in his formulations the Canadian AIDS case numbers are about to flatten out at around 50 new cases a month.

Mr. Wells said he could not confirm Prof. MacNeill's analysis, but he agreed that most previous predictions of the already infected population were little more than "elaborate guesstimates."

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CHILE

Number of Confirmed AIDS Cases Rises

54000004 Santiago LA TERCERA DE LA HORA in Spanish 30 Sep 87 p 12

[Text] Chile, like the United States and some European countries, is facing an epidemiological outbreak of AIDS in the opinion of Dr Daniel Villalobos. He gave a talk on the subject in the CENI of the University of Santiago.

The physician participated in a conference organized by the Department of Information, Orientation, and Student Relations and the Department of Health of that university. Students and other members of the university community attended that conference.

In Dr Villalobos' opinion, the epidemiological outbreak of this disease in Chile demonstrates an increase in native cases (contracted in Chile). Initially the disease was contracted abroad. He recalled that 20 cases showed up in one 6-month period.

The doctor used slides to show the evolution of the disease in the country. He indicated that 39 percent of the 53 confirmed cases of AIDS are in the Metropolitan Region, 13.1 percent in the Eighth Region, and 10.6 percent in the Fifth Region. It mainly affects people between 25 and 40 years of age. There could be 80 cases by the end of the year.

He stated that only two women have contracted the disease. Some 69 percent of the men had a background of homosexual or bisexual behavior.

He also said that as the disease advances, homosexuality plays a smaller role.

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COLOMBIA

Four-Year Vaccination Program Approved

54002002a Medellin EL COLOMBIANO in Spanish 12 Sep 87 p 1C

[Text] Bogota (COLPRENSA)—Yesterday, Friday, the national government and four international organizations signed an agreement guaranteeing mass vaccinations against diphtheria, tetanus, polio, whooping cough, and measles for the next 4 years.

The Colombian Government and WHO agreed to allocate \$10.5 million. The former will contribute the higher amount, \$8 million.

Rotary Club International promised to continue providing polio vaccine. It will hold its second national vaccination campaign on 16 September.

A large part of the donations from PAHO and WHO will be used for transportation costs for the people who will participate in the different vaccination campaigns and for maintenance of the cooling system needed to preserve the sera.

Health Posts

During the formal ceremony, Minister of Health Jose Granada Rodriguez announced that there will be a considerable increase in the number of health posts that will be involved in the mass vaccination campaigns.

Other organizations participating in the agreement are PAHO and the National Immunization Program.

This agreement reinforces agreements signed in 1950 and 1957 with PAHO, WHO, and UNICEF, respectively.

The government assured that it will promptly provide the professional, technical, auxiliary, and administrative personnel needed.

UNICEF will contribute technical services, personnel, and resources of approximately \$650,000.

The signatories agreed to meet quarterly to follow up on the plan and analyze the activities carried out.

Finally, the minister of health stated that the government will be responsible for customs transactions under the health law.

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Distribution of AIDS Cases Reviewed

54002002b Bogota SEMANA in Spanish 15 Sep 87
pp 54-56

[Excerpts] Some months ago the increase in the number of people infected with AIDS was compared to the story of the grain of rice and the chessboard. Many people thought that this was an exaggeration. They did not think that the number of people with positive blood tests (carriers of the virus) could double in 4 or 6 months. Therefore, the figures recently revealed by the Ministry of Health frightened more than one person. The number of officially confirmed cases has risen from 59 as of April 1987 to 153. The figures given merely as a point of reference turned out to be amazingly precise. The increase is not only surprising but surprisingly dangerous.

The AIDS "Iceberg" in Colombia

	Percentage	Number
Cases reported	2	153
Cases of opportunistic diseases	25	1,912
Asymptomatic carriers	73	5,584

The number of people in Colombia infected with AIDS can be estimated by a simple rule of three. If 153 cases (the tip of the "iceberg") equal 2 percent, how many will equal 100 percent? The answer is alarming, especially considering that it is a very low estimate: 7,650 cases. That number corresponds to all the people who are infected with the virus, not only documented cases but also those with positive blood tests, or asymptomatic carriers, as well as those who suffer opportunistic diseases which are not reported as AIDS.

WHO has determined that the number of people with opportunistic diseases is equivalent to 20 to 25 percent of the total cases. The Ministry of Health felt that the percentage in Colombia should be higher. There could be more than 1,900 people not reported to the authorities who suffer from some manifestation of AIDS in Colombian hospitals and clinics, in the health posts, or simply dying at home. They complete the "iceberg" of AIDS in the country.

Self-Defense Against AIDS

It looks like—and it is assumed that—the AIDS situation in Colombia is following a pattern tragically similar to other countries. Dr Manuel Guillermo Gacharna, director of epidemiology of the Ministry of Health, told SEMANA that studies by his office to determine the profile of the spread of the disease in the country have detected female prostitution centers in four cities where the rate of infection is between 2 and 6 percent. Therefore, the doors are open for the spread of the disease to the heterosexual population. "There are already cases in Colombia of hemophilic children infected by transfusions although it must be explained that they were infected outside the country. Soon we will be facing an increase of children infected in the womb by their mothers in view of the evidence that AIDS has shown up in prostitutes."

Facing the magnitude of the potential problem in the country, efforts cannot be limited to the official sector, according to Gacharna. "An important step would be to establish a fund to fight AIDS. Private enterprise could contribute resources that could be combined with state resources." The ministry announced that the medical and paramedical personnel are considered sufficiently well-informed about the characteristics of the epidemic. However, that is not enough. Dr Gacharna stated: "The problem is society's problem. The medical sector can only make the diagnosis, try to find a cure, and warn about the need for a radical change in sexual customs.

Social scientists like psychologists, sociologists, anthropologists, and social commentators must also do their part. For example, the community must be organized at all levels. There must be information centers, with the aid of the health centers, in parishes, parents associations, unions, etc. There is no question that a community that does not organize itself is letting the problem gain ground."

Now the ministry is involved in the introduction of a bill that exempts from tax the import of elements related to the fight against AIDS. This includes the only known drug that does not cure the disease, but stabilizes the individual for some time—Azidotimidine (AZT). Its cost is its greatest drawback. Treatment of one single patient costs \$10,000 a year—that is, more than 2.5 million pesos.

The chapter on AIDS in Colombia is not over. The news keeps getting worse. What concerns many observers is that the country might still be underestimating the problem and the "iceberg" could be larger than assumed.

Distribution of AIDS Cases by City

City	Number
Bogota	45
Cali	41
Medellin	34
Armenia	12
Cartagena	9
Pereira	5
Ibague	4
Bucaramanga	1
Cucuta	1
Santa Marta	1

Source: Directorate of Epidemiology, Ministry of Health

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COSTA RICA

Higher Incidence of Tuberculosis Found

54002001 San Jose LA NACION in Spanish 20 Sep 87
p 5a

[Text] The number of cases of tuberculosis in Costa Rica increased 24.6 percent compared to January through the first week of September 1986.

This was learned from recently compiled data from the Statistics Department of the Ministry of Health. According to that information, 163 cases of tuberculosis were reported during that period last year. That figure has increased to 216 so far this year.

According to the director of the Department of Respiratory Diseases of that ministry, Dr Juan Marin Monge, there is a very high rate of tuberculosis among the people in refugee camps.

He pointed out that for every 100,000 inhabitants in the refugee camps, there are 35 to 45 with tuberculosis. This is triple the national rate which is about 13 per 100,000 inhabitants.

The official revealed that they have diagnosed nine cases and one child with tuberculous meningitis. About 250 children do not have tuberculosis, but were given preventive treatment because they could develop the disease at any time.

He stated, however, that the situation in other camps like Alvaperal, El Achiote, and Playa Blanca must still be analyzed. This has been difficult because of climate conditions.

He added that the population in the camps is expected to have a higher rate of tuberculosis because the refugees arrive in precarious health which makes them more vulnerable. This is true of people with lowered defenses, malnutrition, physical exhaustion, and concomitant diseases.

Crowding also increases the transmission of the disease.

Dr Marin Monge stated that, in addition to determining and diagnosing cases, they are providing preventive treatment and medical treatment like the BCG (antituberculosis) vaccine.

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INDIA

Health Official Gives Statistics on Leprosy

54500044 New Delhi PATRIOT in English
14 Oct 87 p 5

[Text] Pune, October 13 (UNI)—About four million cases of leprosy are estimated in India out of a total of about 15 million the world over, according to Dr A.K. Mukherjee, additional director health services, New Delhi, reports UNI.

In all, 201 out of the total 430 districts in the country have disease endemicity of five or more per 1,000 of their population. About 20 percent of the cases are infectious and almost an equal percentage of patients suffer from disabilities or deformities. A 20 percent of the patients are children, Dr Mukherjee informed. He was speaking on the "national leprosy eradication programme" at a "health writing workshop" of the Press Institute of India cosponsored by the Asian Mass Communications Research and Information Centre, Singapore, and the 'Kesaari', Pune.

The three-day workshop for journalists from Maharashtra and Goa was inaugurated yesterday by Pimpri-Chinchwad Mayor Nanasaheb Shitole in the absence of Maharashtra Health Minister Bhai Sawant.

Mr Shitole called upon journalists to try and remove misconceptions people have about health problems.

Press Institute of India director Parakasa Rao highlighted the activities of the Institute while Kesari editor S.D. Gokhale talked about the lack of health information.

Dr Mukherjee said that by the end of July 1987, about 3.3 million leprosy cases had been detected and brought under treatment.

He said the Centre had given high priority to the eradication of leprosy and the earlier national leprosy campaign programme had been redesignated as the National Leprosy Eradication Programme (NLEP) which aimed at arresting the disease by 2000 AD.

The NLEP, he said, operated in endemic areas with a disease prevalence of five and more per 1,000 people. One Survey Eradication and Treatment (SET) centre for 25,000 people and one leprosy control unit for every 450,000 people had been established in rural areas. For urban areas, one urban leprosy control centre for every 50,000 people was being established besides providing one Temporary Hospitalization Ward (THW) and district leprosy unit at each endemic district level, he said.

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Leprosy Reported on Increase Among Kerala Tribals

54500045 New Delhi PATRIOT in English
18 Oct 87 p 5

[Text] Cochin, Oct 17 (UNI)—Incidence of leprosy among the tribals of Malappuram in Kerala is on the increase.

An intensive campaign to check the spread of the disease and to cure the afflicted through multi-drug treatment (MDT) with the assistance of the World Health Organisation has been started.

There are 162 tribal pockets in Malappuram district which has a population of 8,356, according to official statistics.

Out of 3,964 tribals examined under the leprosy eradication programme in the Nilambur and Vandoor blocks, 364 were found to be suffering from the disease in varying degrees. Among the affected were 51 children. There were 22 patients with deformity.

It had been noted that even the Cholanaickans, the smallest and most aboriginal tribal entity of 160 population living in caves of Mancheeri hills were not free from the disease. Eight cases of leprosy were noticed among them.

Dr K.P. Rajendran, in charge of the leprosy control unit at Nilambur, told UNI that the average percentage would come down to four, which itself was high compared with the national average of two to five per thousand population.

According to Dr Rajendran, the real cause for high incidence of the disease among the tribals was not known but one cause could be the unhygienic living conditions and their low immune status.

He said the response to the multidrug treatment programme from the affected tribals was encouraging.

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AIDS Victim Sought

54500046a Calcutta THE TELEGRAPH in English
23 Oct 87 p 4

[Text] Srinagar: The Kashmir police has launched a massive manhunt for a Canadian who is reported to have sneaked into Jammu and Kashmir after deserting a hospital in Shimla where he was being treated for AIDS. Police sources said M. Michael who is in his early thirties, was believed to have arrived in Srinagar, in the second week of October but did not register himself with the foreigners' registration office here as required by the law.

Soon after, Dr Salahuddin, head of the AIDS screening centre at the Sher-i-Kashmir Institute of Medical Sciences here, received a telegram from Shimla that the AIDS patient had left for Srinagar. The police and tourism people at various resorts were alerted. But the police failed to trace him though it search some houseboats and guest houses besides checking registers at various hotels here and also at several other tourist resorts in the valley.

Michael had left his postal address as "Care GPO, Srinagar 190 001" with one of his acquaintances in Shimla. Though a letter for him had arrived in the general post office here last week, he had yet to collect it.

/9738

Malaria on Decline

54500046b *New Delhi PATRIOT in English*
16 Oct 87 p 2

[Text] Chandigarh, Oct 15—The overall incidence of malaria declined considerably in Haryana in the last nine months as compared to previous years.

Health Minister Mrs Kamla Verma said here yesterday that only 15,525 cases of malaria had been reported this year as against 53,374 last year, showing a decline of 71.3 percent.

The incidence of plasmodium falciparum, a type of malaria, also declined by 86.8 percent in the same period.

Mrs Verma said the cooperation of the people and the intensive surveillance followed by regular insecticidal spray campaign made this possible.

Mrs Verma said that 15 towns of the state were being covered under the urban malaria scheme. The government would spend Rs1.14 crore under this scheme during current year.

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Tamil Nadu AIDS Case

54500046c *Calcutta THE STATESMAN in English*
2 Oct 87 p 7

[Excerpt] Madras, Oct 1—The first full-blown case of Acquired Immuno Deficiency Syndrome in Tamil Nadu has come to light with the admission of a 58-year-old teacher from Vellore in the Government General Hospital here, reports PTI.

Doctors first suspected him to be suffering from the dreaded disease when the symptoms failed to conform with those of any other illness according to the hospital dean, Dr Suriya Begum.

She told reporters yesterday that though the positive result of the Elisa Test, the preliminary test to detect the AIDS virus had been confirmed by the more reliable Western Blot Test done at Vellore, full picture would emerge only after the analysis of the blood samples sent to the Institute of Virology, Pune, for the virus to be isolated, was received.

The teacher displayed various symptoms of the disease, including persistent high fever, loss of weight and enlargement of the lymph glands, she said, adding that adequate precautions such as the steps to isolate the patient were being taken at the hospital to prevent the spread of the infection.

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Heart Disease in Delhi

54500046d *New Delhi PATRIOT in English*
28 Sep 87 p 3

[Excerpts] A free heart check up camp was held in the Capital on Sunday by the Heart Care Foundation of India in collaboration with the Rotary Club as a part of its nationwide campaign for early detection of heart disease and adoption of preventive and curative measures.

Delivering a talk on the occasion, eminent cardiologist and HCFI chairman Dr (Col) K.L. Chopra deprecated the use of artificial fertilizers and artificially softened pipe water as not being good for health, especially for those having high blood cholesterol.

Referring to the alarming proportion of heart diseases, Dr Chopra pointed out that nearly three crore people in the country are estimated to be victims of heart diseases. "In Delhi alone nearly 2.50 lakh people in 25 to 64 years age group are suffering from coronary heart diseases that lead to angina and heart attack", he noted.

"About nine lakh people in Delhi have high blood pressure which if allowed to go unchecked can lead to heart attack. Heart disease is spreading fast among the younger generation in the country", Dr Chopra added.

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Increase in Polio

54500046e *Madras THE HINDU in English*
21 Sep 87 p 3

[Text] There is no let up in the number of polio cases reporting at the Institute of Child Health, Egmore, since August.

As against the normal two or three, the institute was admitting daily 10 to 15 children affected by the crippling virus disease. In the wake of this, the Tamil Nadu Government intensified its polio immunisation programme in the city.

Dr. T. Dorairajan, Director of Medical Services, and Dr. R. Narmadda, Director in-charge of the Institute of Child Health, told reporters on Saturday that there was no shortage of polio vaccine and the hospital always had stock to last a month. The cases coming to the hospital were not from any particular area but from different parts of the city. And 60 percent of the children with polio came from the city and 40 percent from outlying areas. Among the affected children, at least 20 percent had reportedly received polio vaccine before.

Dr. Narmadda said that there was also an increase in the number of diarrhea cases coming to the hospital.

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JAMAICA

20 of 30 AIDS Cases Reported by September Now Dead

54400011 Kingston *THE DAILY GLEANER* in English
1 Oct 87 p 2

[Article: "Thirty AIDS Cases Here"]

[Text] Thirty Jamaicans have been reported to have contracted Acquired Immune Deficiency Syndrome (AIDS) up to last month.

According to figures from sources in the Ministry of Health, 20 of these Persons With Aids (PWA) are dead.

A senior medical officer in the Ministry told the *Gleaner* yesterday that as a result of recent research done by USAID consultants "the prospect for the future for Jamaica is grim unless the disease is controlled."

So far, about 150 Jamaicans have been reported to have cases of HIV infection throughout Jamaica. Most of the cases are from the Corporate Area, he said.

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MEXICO

Mexico State Private Blood Banks Said AIDS-Contaminated

54002003 Mexico City *LA JORNADA* in Spanish
17 Sep 87 p 8

[Article by Gloria Perez Mendoza, correspondent]

[Text] Toluca, Mex., 16 Sep—The director of the Health Institute of Mexico State, Dr Gustavo Baz Diaz Lombardo, revealed that 12 cases of AIDS have been recorded so far, 2 of them in children. He added that studies by his institute verified that 42 percent of the blood that private blood banks sold was contaminated by AIDS.

He explained that two cases of AIDS were detected in Cuautitlan and Nezahualcoyotl. The victims are being treated medically. He said that the health organization is using preventive measures to try to keep the disease from spreading.

He reported that a safety cordon has been established to keep contaminated blood from being transfused to other people. He added that the need for blood transfusions has increased considerably. At least 600,000 liters of blood are needed throughout the republic each month to satisfy the demand of the hospitals.

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MOZAMBIQUE

EEC Gives \$1.5 Million Under SADCC Tsetse Eradication Program

54000227c Maputo *NOTICIAS* in Portuguese 20 Jul 87
p 8

[Text] A program to eradicate the tsetse fly has been underway since last year in four countries of the SADCC [South African Development Coordination Conference]—Mozambique, Zimbabwe, Zambia, and Malawi. The tsetse fly is responsible for spreading the disease trypanosomiasis which in recent years has taken the lives of humans and decimated cattle in various regions of the country.

This program is divided into two stages and is financed by the EEC, which has made \$1.5 million available to Mozambique for this purpose.

The first 10 year stage of the program includes various activities for hunting down the tsetse fly, new methods for eradicating it and improvements to existing procedures.

The second phase, also projected for 10 years, will revolve around land use planning after eradication of the insect, which causes a disease called "nagoma" in livestock and "sleeping sickness" in man.

According to Filimao Saveca, our correspondent in Chimio, who quotes the coordinator of the Regional Tsetse Fly Eradication Program, biologist Marcelino Molane, "this insect is present in two-thirds of Mozambique." With rigorous preventive measures, it is possible to keep the livestock in these regions.

The biologist went on to say that the sleeping sickness caused by the tsetse fly is particularly prevalent in the northern part of the country, where it has caused a high number of deaths.

Referring to the work to be done in conjunction with the other African countries involved in the program, Marcelino Molane said that each of the countries has a specific program based on the development and proliferation of the tsetse fly.

He added that there are coordinated activities to eradicate the disease along the common borders. He pointed out that for these joint activities, all the available technical means are used.

Difficulties Aggravate the Situation

Mozambique has opted for treating the disease affecting livestock, which involves heavy investment for the small numbers of existing livestock, according to Marcelino Molane.

"As we investigated the disease to determine patterns in each region of the country, we found that there were four species of the fly in these regions, two of which are considered quite dangerous because of their rapid propagation."

As for the results already obtained from the tsetse fly eradication program in the country, Marcelino Molane said that they could be regarded as "very poor, since the situation has even worsened in some parts of the country."

The biologist went on to explain that the war could prolong the period fixed for carrying out the program since in some regions in the north of the country, there are many foci of the insect.

To accelerate the tsetse fly eradication program in the country, two more teams will be formed shortly, one in Magoie in Tete Province, and the other in Massagena in Gaza Province.

09805/09599

Brazilian Donation for Vaccination Program

54000227a Maputo NOTICIAS in Portuguese 4 Aug 87
p 8

[Text] The Brazilian government, through the Oswaldo Cruz Institute Foundation, has just donated a large shipment of medicine to the Mozambican Health Ministry, to be used for the Extended Vaccination Program currently underway in the country, according to a report from the Brazilian Embassy in Maputo.

The donation includes 20,000 doses of rabies vaccine to immunize domestic animals, 10,000 doses of yellow fever vaccine, and 10,000 doses of anti-diphtheria serum. This is the second time this year that Brazil has participated in the international mobilization of aid for the Mozambican people, in response to the appeal made from Geneva by United Nations Secretary Javier Perez de Cuellar.

Last May the Brazilian government sent 240 tons of medicine to the country's Emergency Aid Program for people displaced by war and victims of natural disasters.

09805/09599

Chiure District Measles Outbreak Under Control

54000227b Maputo NOTICIAS in Portuguese 7 Aug 87
p 3

[Text] Cabo Delgado health officials believe the measles outbreak that has afflicted various villages in Chiure District since last April is under control. The disease has already taken the lives of 100 children ranging in age

from newborns to 9 years. A large number of the victims are families of persons displaced by the war, regarded as the population group most susceptible to endemic diseases.

Last week the provincial head of health in the commune brought to Chiure all the aid needed to complete the campaign against measles, including more vaccines and vehicles, and a permanent post was set up in Chiure Velho where there has been the highest incidence of cases in the past 2 weeks. "There were discrepancies in the data on the number of deaths and certain problems related to supplies and transportation. We went to the villages and helped control the situation," reported Antonio Amisse to our correspondent after his return from Chiure.

The settlement of Magaia is the only one currently reporting increased cases of measles. According to Antonio Amisse, citing information from Chief Daniel of the rural community and the elementary education officer, 106 deaths have already been reported in that area alone, 6 of which were of children attending primary school. Fifteen youths with measles symptoms were also identified.

The settlement of Magaia is part of the town of Chiure-Velho, which is located about 30 kilometers from the district headquarters. The shortest road is impassable because it is in such poor condition. The population of the settlement is 3,899, a large part of which is made up of families displaced by the war.

The provincial health officer of the commune said that last week all the children who had never had contact with the health authorities were vaccinated. All the young people in settlements surrounding Magaia, including Nicole and Nantaco, were also vaccinated.

"After this work, we concluded that a large part of the children who had never been vaccinated were from the zones where the armed gangs were active, i.e., Namapa in Nampula and Mazeze, an administrative post in Chiure District, where recent attacks by the gangs caused dozens of families to disperse," Antonio Amisse said.

Because of the constant movement of people in Chiure as a result of attacks by the armed gangs and the existence of people displaced by the war, estimated by the Provincial Emergency Commission at 26,658 persons, there is a strong possibility that a new outbreak of measles could occur at any time, particularly in areas that are difficult for the health authorities to reach.

09805/09599

Chimoio Vaccination Campaign Reaches 14,523
54000014a Maputo NOTICIAS in Portuguese
22 Oct 87 p 3

[Text] A total of 14,523 people were vaccinated during the first six months of this year in Chimoio, the capital of Manica province, as part of the Extended Vaccination Program being carried out throughout the country. Of those vaccinated, 1,864 were children vaccinated against measles, 7,710 individuals received the 1st, 2d, and 3d doses of DTP and polio vaccine, 1,822 were vaccinated for BCG, and 4,746 antitetanus vaccines were administered in the 1st and 2nd doses to pregnant women.

The health director of the city of Chimoio, Pedro Jorge Mateus, who spoke recently with our reporter in Manica province, said that during the first half of the year several other preventive medicine activities were carried out, among them the construction of 394 latrines, the completion of 311 sanitary landfills, and the construction of 62 animal stables near local residences.

Also, Pedro Mateus said that 658 inspections of sources of water supplies for the local population were completed; the inspections were aimed at controlling the quality of public drinking water in order to prevent diseases that might be present in some wells and other sources, as is the case in the city's own supply network.

Meanwhile, the city of Chimoio was this year assigned a specific target level for actions involving disease prevention; the targeted action levels, as compared with other years, "were doubled, forcing us to deploy increased efforts in order to carry out the program; the target is not beyond our capacity to achieve," according to what we were told by Mateus.

The health care network in Chimoio reaches 141,000 people through 5 health centers and the provincial hospital, guaranteeing to some extent that all citizens can benefit from medical assistance provided in their own neighborhoods.

Last year, there were places where there was no medical-sanitary assistance available to the local people, and they were forced to travel long distances to receive treatment in the city. "In every location where there is a neighborhood there is a medical station providing assistance in the health areas for which we are responsible; or there is even a fairly well-developed medical center, some of which have maternity facilities," said the health director of Chimoio.

Later, he confirmed that in 1986 the established target for vaccinations in Chimoio was 4,008 people, whereas this year, "we have been able to deliver 13,178 immunizations against various contagious illnesses; this means that we achieved 190 percent of the target level for this year." On the basis of that performance, the Health Ministry leadership decided to revise the target levels for

Chimoio so as to bring them into alignment with the city's capacity for action; they will provide equipment and teams of specialists to carry out the work with the local people.

12857

1,000 Children Vaccinated in Maxixe
54000014b Maputo NOTICIAS in Portuguese
5 Oct 87 p 3

[Text] At least 1,000 children, ranging in age from newborn to 24 months were vaccinated against tuberculosis, infantile paralysis and measles in Maxixe, Inhambane during the first round of the Extended Vaccination Program carried out in that city last July.

During the same period, the mobil brigades of the health service vaccinated 88 pregnant women against tetanus, and they performed 184 pre-natal consultations.

During the vaccination campaign, infant testing was also carried out, leading to the identification of 128 underweight children. These children were sent to the rural hospital at Chicuke in order to benefit from medical controls that are part of a regime of special attention.

12857

PORTUGAL

Poll Denotes Little Fear, Ignorance of Aids
54002414b Lisbon O JORNAL in Portuguese
23 Oct 87 p 54

[Text] More than half of all Portuguese (56.9 percent) show little or even no concern about the danger of contracting AIDS, according to a poll taken this summer under the auspices of the AIDS Working Group. Only 21.8 percent of the population claims to be "somewhat concerned," and 16.1 percent "very concerned."

The study, directed by public health specialist Joao dos Santos Lucas, included 998 persons "representing that segment of the population over 15 years of age residing in Continental Portugal in communities of 10 or more, that is, 7,465,000 individuals."

The majority (69 percent) considers it a normal disease that "could affect anyone," with 15.4 percent understanding it to be typical of "homosexuals, prostitutes, and drug-users." In this respect, it is curious to note that it is the "highest" and "lowest" social classes that demonstrate the fewest prejudices.

Some 66 percent, however, believe it to be "very possible" or "somewhat possible" that the disease might affect many of us, as opposed to 14.8 percent who believe the opposite.

Less Sex

Changes in the lives of Portuguese are visible in this poll, including "reduced sexual activity," "more stability," and a reduction in the number of partners.

Although 15 percent refused to respond, 26 percent stated they had not had sexual relations in 6 months and 22.3 percent in 3 years; 54.8 percent had had relations with only one person in the last 6 months, and 49.9 percent in the last 3 years. Four percent claimed to have had relations with more than one partner in the last 6 months, and 2.5 percent in the last 3 years.

The majority of the sexually active population (58 percent) stated, however, that they "had not changed their sexual habits and behavior because of AIDS."

Sexual transmission of the virus was the means most commonly mentioned (56.5 percent), followed by blood transfusions (30.9 percent) and contaminated syringes (17.9 percent); 23 percent, however, were unaware of how the disease is contracted, an indication of the inadequacy of the public awareness campaigns that have been undertaken to date.

Insufficient Information

More than a quarter of those polled "do not realize the effectiveness of the condom in preventing transmission of the disease through sexual activity when one of the partners is infected." In fact, 20 percent of those "individuals with multiple sexual partners do not believe condoms to be effective." In the "lower classes, 64 percent of the population admit not being aware of its effectiveness for prevention of AIDS." However, 65 percent of those polled believe "that for casual sexual activity, condoms should always be used."

Seventy percent of those polled believe that before marriage or in new relationships, people should discuss their relevant past activities in order to inform their future partners. Keeping this information to oneself, however, is defended by 17 percent, with 39 percent of the "lower class" pertaining to this category. Sixty-five percent, especially the youngest, approve of tests, with 4 percent flatly refusing to be tested.

Information on the disease has not been widely disseminated among residents along the coast nor in the northern and southern interior, the illiterate and those with only a grade-school education.

Reduced Risk

The belief among those polled that they are "hardly susceptible" to the virus "does not encourage a climate favorable to the adoption of preventive behavior," if only because, "as can be seen, the majority of the sexually active population with multiple partners has not changed its sexual habits as a result of AIDS."

The authors of the poll conclude, on the other hand, that "the risks of contracting AIDS will probably fall in Portugal, since in the past 3 years the proportion of individuals practicing sexual relations with multiple partners has diminished significantly."

Wrong Ideas

Only slightly more than 4 percent of the population believes AIDS to be transmitted "Through homosexual activities," and 2.1 percent "through relations with prostitutes."

The percentage of those who attribute its transmittal to transfusion of blood or its derivatives is much higher (30.9 percent). For 17.9 percent, transmittal is attributed to "used syringes," the "activities of drug-users," and "hypodermic needles"; 16.3 percent attribute it to various means such as "lack of hygiene," "use of razor blades and cutting utensils," and "mosquito bites."

More than 50 percent believe that there is "great risk" in "kissing an infected person on the mouth," 40.4 percent in "sharing toothbrushes," 19.5 percent in "public washrooms," 6.5 percent in "public pools," 3.3 percent in "public transport," 3.1 percent in "restaurants, pastry shops, and cafes," 3 percent in "kissing a friend on the cheek," etc.

As can be seen, lack of information and wrong ideas continue to exist among us. Knowing "that a vaccine will not be available for at least the next 10 years," the "best weapon to control the spread of the disease by the AIDS virus" is education, informing the populace through programs "adapted to local custom" and to "specific national requirements."

Three percent of the women and 22 percent of the men admitted to having multiple "sexual partners in the last 3 years." Among divorced persons, at least 32 percent have had relations with more than one person during the last 3 years, compared to 21 percent for unmarried persons and 9 percent of married persons.

13026/09599

Unequal Distribution of Physicians Nationwide
54002414a Lisbon DIARIO DE LISBOA in Portuguese
8 Oct 87 p 10

[Text] The number of physicians in Portugal is some 26,000, but their distribution is irregular and does not correspond to the needs of every area and region. They are distributed haphazardly, because there is no method or system to anticipate differing needs in terms of regional population density.

According to figures provided by the National Statistics Institute, the number of physicians in Portugal last year was 25,696, an average of approximately 1 physician per 400 inhabitants if they were evenly distributed. This is

not in fact the case, even assuming the best scenario, i.e., that the current situation remains stable; the most likely event is that the distribution will become even more irregular.

The explanation for this is simple: last year, 78.2 percent of Portuguese physicians were located in the districts of Coimbra, Lisbon, Porto and Setubal. Portuguese hospitals last year counted 48,763 beds, 83.5 percent of them in government hospitals and the rest in private institutions.

In 1986, 863,225 persons were admitted to Portuguese hospitals and 32.5 million consultations took place. During the same year, there were 127,054 births, 3,861 fewer than in 1985, which confirms the declining birth rate trend in Portugal since the beginning of this decade.

On the other hand, 99 percent of births in Portugal are properly attended to by qualified medical personnel.

Infant mortality reached 15.8 per 1,000 last year, the lowest lever ever. The primary cause of all deaths occurring in Portugal (25 percent) falls under the heading of "cerebrovascular disease," followed by diseases of the heart, tumors, liver disease, and traffic accidents.

13026/09599

SIERRA LEONE

AIDS Victim Expelled From USSR

AB080949 Paris AFP in French 1804 GMT 7 Nov 87

[Text] Freetown, 7 Nov (AFP)—The first Sierra Leonean AIDS (Acquired Immune Deficiency Syndrome) victim arrived in Freetown on 5 November following his expulsion from the Soviet Union where doctors had diagnosed his case, medical sources disclosed today in Freetown. Upon arrival, Hassan Bangoura, who was a medical student in the Soviet Union, was sent under medical escort to a hospital specialized in the treatment of tuberculosis patients, the sources added.

According to the Soviet Embassy in Freetown, Mr Bangoura, who is more than 30 years old, underwent tests in the Soviet Union and was diagnosed "as an AIDS virus carrier." The Sierra Leonean medical authorities, on their part, declared that intensive tests are being carried out on Mr Bangoura to determine if he is an AIDS virus carrier.

SOUTH AFRICA

Heterosexually-Spread Aids Increasing in Cape

54000017a Cape Town CAPE TIMES in English
5 Nov 87 p 1

[By Chris Erasmus

[Text] "African" AIDS Is Spreading in South Africa. Twenty pregnant women have recently been identified in the Transvaal carriers of the virus and women infected

with the AIDS-causing virus (HIV) have begun appearing in increasing numbers in both Natal/KwaZulu and the eastern Cape.

This indicates that heterosexually-spread AIDS is beginning to take hold in these areas, as it has throughout central Africa.

A *Cape Times* inquiry showed that in the western Cape 190 infected individuals have been identified in the 30 months since antibody testing began, but almost all are men, suggesting that "African" AIDS has yet to reach this region.

Up till now the Department of National Health and Population Development has held that SA's AIDS problem was still relatively small and almost exclusively limited to male homosexuals suffering from the "Western" variant of the disease.

According to figures from the SA Blood Transfusion Service in Johannesburg, the 20 pregnant women with AIDS-virus antibodies were among 37,920 of all races whose blood had undergone routine antenatal blood tests since May this year.

The medical director of the transfusion service, Dr Maurice Shapiro, said: "We have developed a system for pooling blood samples for testing for the presence of HIV antibodies, which has reduced the cost per sample to about 10c."

He appealed to the government to consider carrying the cost of free HIV tests for all South Africans who wanted them.

"If we are going to deal effectively with AIDS, all the publicity in the world is going to do little good. Rather, we should be tracking down those with the infection, counselling them, and offering protection against discrimination and prejudice in the workplace."

Dr Shapiro said the study, which is due to run for another six months, had detected no white or Asian pregnant woman affected with the virus out of 6,144 white and 501 Asian women tested in the first six months.

But it had detected one "coloured" and eight black HIV-infected pregnant women in the first three-month phase from May to July, while one "coloured" and 10 black infected women had been detected between August and October.

"This indicates firstly that our figures are reliable and secondly that the numbers are increasing."

Dr Derek Dickson, deputy medical director of the Border Blood Transfusion Service, said the number of people infected with the AIDS virus in his area, which covers Transkei, Ciskei and a small part of SA, was "infinitesimal."

However, of the few cases to come to light so far, all were women.

"Our figures here are too small to jump to conclusions, but obviously the Limpopo River is no barrier to this disease and it's just a matter of time before we start to have large numbers of African AIDS cases in SA," he said.

Dr Clive Prior, medical director of the Natal Blood Transfusion Service, said: "Compared to the situation in countries to the north of us, the rate of infection in SA is still very low, but it is disturbing that this rate appears to be increasing.

"It is now critical that an education campaign aimed at blacks should be given the highest priority, as our recent figures clearly show that it is among this group that infection, probably through heterosexual contacts, is growing the quickest," he said.

/12913

Summary Repatriation of AIDS Carriers Denied

54000017b Johannesburg SAP in English 1500 GMT
4 Nov 87

[Text] The Department of Home Affairs will not summarily repatriate citizens of neighboring states who are carriers of the AIDS virus. A spokesman for the department told our Pretoria news staff that although regulations for the repatriation of these people had been promulgated last week, the problem would be approached with caution. Each case would be considered on its merits and carriers would be repatriated only as a last resort. The spokesman said his department was cooperating with the Department of National Health and Population Development to identify carriers of the disease and to take decisions on their repatriation.

/12913

Expert: Number of AIDS Victims Doubling

54000016 Johannesburg THE STAR in English
20 Oct 87 p 9

[Article: "Number of AIDS Victims Doubling—Expert"]

[Text] The number of AIDS victims in South Africa is doubling every year and South Africans will have to change their lifestyles and realise the potential of the disease to spread sexually, says Dr Ruben Sher, head of the AIDS Unit of the South African Institute for Medical Research.

Dr Sher—who will speak at the biennial congress of the Institute of Public Health at the Sinodale Conference Centre in Pretoria later this month—said according to latest statistics, 62 South Africans, and 20 non-South Africans have been treated for this deadly disease in this country.

"Of the 62 South Africans, 55 have been homosexual and bisexual men, two heterosexual men, two blood transfusion cases and three haemophiliacs.

Of the 55 homosexual men, 54 were white and one was coloured. Sixty-seven percent of the victims have died," said Dr Sher.

Other speakers include Dr Sylvain de Miranda, an expert on drugs and alcohol abuse.

/9604

SWEDEN

Chlamydia To Be Classified as Venereal Disease
54002422 Stockholm DAGENS NYHETER in Swedish
20 Nov 87 p 22

[Text] Chlamydia should be classified as a venereal disease in the law on contagious diseases. This was decided by the Parliament unanimously on Wednesday [18 November].

With this, society is sending a signal that this is a matter of a serious infection, and the rules for reporting will be made uniform. Examining and treating will be free of cost to the patient.

The Social Welfare Authority estimates there are between 80,000 and 120,000 people in Sweden infected with chlamydia. It is a sexually transmitted disease which, aside from causing discomfort, often leads to inflammation of the Fallopian tubes and then to sterility. Chlamydia is now estimated to be from three to five times more common than gonorrhea.

Chlamydia is especially common among young people between the ages of 15 and 25.

The Parliament rejected a proposal to also designate herpes and condylom as venereal diseases.

/09599

ZIMBABWE

Advertisers Pool Efforts in Anti-AIDS Campaign

54000021 Harare *THE FINANCIAL GAZETTE* in
English 9 Oct 87 (IMAGES Supplement) p 3

[Text] For the first time in Zimbabwe, creative directors from all major advertising agencies have offered their services to devise a national campaign on Aids awareness.

The national campaign, which has the support of the AAPA, ADMA, AAZ and the Production House Association, began with the submission of over 50 possible campaign layouts by creative directors.

The managing director of Matthewman Banks Advertising, Mr Maurice Matthewman, whose agency is coordinating the campaign, told Images that the number of concepts had been cut down to 13 and the "contributing bodies are finalising a campaign." He said that media heads are being contacted for space allocations.

Mr Matthewman said that the campaign's emphasis would be to remind the public that Aids poses a threat to everybody who has more than one sexual partner. He added that it would be simple and instructive.

08309

CANADA

Fish Kill in Surrey Creek Blamed on Toxic Chemical

54200009 Vancouver *THE SUN in English* 30
Sep 87 p A3

[Article by Glenn Bohn, SUN Environmental Reporter]

[Text] An unidentified toxic chemical has killed "at least 500" fish at Hyland Creek, a small, vulnerable waterway in central Surrey.

Small salmon and trout floated belly-up in the creek, their skins whiter than normal because the chemical contaminant was highly acidic.

Investigators with the federal environment and fisheries departments said they had not yet pinpointed the source of the spill. They urged anyone with information to phone 666-6100.

Three years ago, a spill of highly toxic chlorophenols from a paint factory also destroyed fish in the creek.

For Jerry Falk, president of the Semiahmoo Fish and Game Club, it was another blow to an urban stream.

"My gut reaction is unprintable," angry Falk said Tuesday when informed of the spill. "It's all we've got. We don't have a wilderness setting here."

After the last spill, young fish from the club's hatchery in White Rock were used to return life to Hyland Creek. Coho salmon, which live 1 year in fresh water before going to sea, were abundant.

"Just how long will it take?" Falk asked. "We don't hate industry. Never have. All we want to see is industry that cares a bit."

Tens of thousands of small fish were killed in 1984 when 45,000 litres of chlorophenol wood preservatives from the Cloverdale Paint Inc. factory of 6950 King George Highway spilled into the creek. The company blamed vandals but, after it took the case all the way to the B.C. Court of appeal, a judge found the company did not take enough precautions and imposed a \$10,000 fine.

At least five industries are located on the creek, but there are also storm sewers flowing into it.

Federal fisheries officer Kelly Bertrand said she went to the stream Monday evening after receiving a report of dead fish. Bertrand said she conservatively estimated there were at least 500 dead fish, but raccoons were feasting on the contaminated victims. She said children were also collecting the unexpected bonanza, but she warned them not to eat the fish.

By Tuesday afternoon, there were only a handful of dead fish along a stretch of stream where Bertrand said there had been a hundred.

/12232

KENYA

Foot-and-Mouth in Turkana

54000018 Nairobi KNA in English 0855 GMT
29 Oct 87

[Excerpt] Lodwar, 19 October (KNA)—The Turkana District veterinary officer, Dr S. Mirega, has imposed a ban on the movement of all livestock in the district due to an outbreak of foot-and-mouth disease in the whole district. In a quarantine notice addressed to the Turkana District commissioner, the director of veterinary services and police officers in the district, Dr Mirega said that the animals which should not be moved out of or into the district include cattle, sheep, goats, pigs and their products.

/12913

SPAIN

African Equine Fever Reemerges, Kills Horses
54002412 Madrid *CAMBIO* 16 in Spanish 28 Sep 87
pp 92-97

[Article by Ricardo Herren with reports from Victor Steinberg, Liz Perales, and Carmelo Cabellos: "Third World Plague"]

[Excerpts] Last July while most Spaniards were enjoying their vacations or dreaming about them, one of the four horsemen of the Apocalypse, Plague, rode into Spain on a zebra. Since then, almost 100 animals (horses, donkeys, and mules) have died in central Spain, victims of African equine fever. However, this slaughter is merely an omen, a foretaste of a shameful national catastrophe: the disease that the zebras carried had been completely eradicated in Europe and America. It was only endemic in its continent of origin.

Many African exports do not make Spaniards happy. First came African swine fever which is now endemic in Spain. It prevents pork exports of any type including the delicious Jabugo ham. Then came AIDS.

Now equine fever threatens to wipe out a major part of the Spanish herd, ruin dozens of breeders, damage the prestige of native equine products achieved through many years of effort, and embarrass Spain in front of its European partners. In addition, if Spain is declared an endemic zone of African equine fever—for a period of 10 years—equine competitions cannot be held at the Barcelona Olympics.

Apparently there is no question that the carriers of the virus were the five zebras that Juan Sevilla, owner of the Aitana Safari Park in Alicante, brought to Spain from Namibia (South Africa). A ship with Bremen (Germany) registration transported six zebras and other wild animals to Europe.

If the disease spreads, many breeders will unquestionably be ruined and an important economic sector with international prestige—especially the Arab and Spanish breeds—achieved through sacrifices in recent years would be destroyed.

Some people are afraid that equine fever—which never attacks man—can affect other domestic animals. Veterinarian Fernando Munoz Galilea feels: "Although it has not been sufficiently studied, there is a possibility that goats and dogs bitten by carrier insects can carry the virus. We do not know what species can be carriers but the dog is one possibility."

7717

ZAMBIA

Cattle Destroyed To Prevent Foot-and-Mouth Disease Spread

54000022 Lusaka *TIMES OF ZAMBIA* in English
5 Nov 87 p 7

[Text] The department of tsetse control yesterday destroyed 24 head of cattle in Choma in its fight against tickborne diseases in the Southern Province.

Provincial veterinary officer, Dr Satwant Singh, said that the animals belonging to a villager in Chief Mapanza's area, were destroyed after they were found with lesions of foot and mouth disease. Dr Singh, who

led a group of officers and armed policemen, said the villager, whose name was withheld, defiantly contravened the ban on stock movement which is in force.

He moved his cattle from the Kafue flats in Chief Nalubamba's area in Namwala to Simaubi two weeks ago.

The shooting of the head brings to 59 the number of animals destroyed so far in the district.

On October 20, the department destroyed 35 cattle belonging to another farmer in Mangunza area who also moved his animals without permission.

Dr Singh expressed concern that some farmers, especially those in border areas of Monze, Namwala and Choma where the Government had spent large sums of money to buy vaccines, were not adhering to the ban.

"This illegal movement of cattle with lesions of foot and mouth disease constituted a great threat to the live-stock industry in the province and so we cannot tolerate this," he warned.

He pointed out that his department would not hesitate to impose similar measures against defiant farmers. So far 14,935 animals have been vaccinated in Simaubi and Mapanza area.

He strongly appealed to cattle owners in Choma to cooperate with his department in preventing the spread of diseases which had potential to wipe out the population of cattle in the province.

"On the whole the majority of cattle owners have been cooperative to us but my appeal is directed to a handful of those individuals who have failed to understand that the ban was not aimed at punishing but at helping them."

08309

BANGLADESH

Large Areas of Paddy Attacked by Insects

54500047 Dhaka THE BANGLADESH OBSERVER in English 16 Oct 87 p 9

[Text] Bagerhat, October 14: The newly transplanted aman paddy seedlings on vast tracts of lands in the nine upazilas of the flood-affected Bagerhat district have been badly affected by various kinds of insects such as "Pamuri Poka" and "Mazra Poka". When contacted the Deputy Director of Agriculture Extension Department of Bagerhat told this correspondent that 7m585 acres of lands were attacked by the insects. But according to the non-official reports received here, the affected areas are more than 30,000 acres.

When this correspondent visited some of the affected areas farmers told me that they were not in a position to purchase costly pesticides due to their economic hardship. They (farmers) complained to me that insecticides which are available in the local markets are highly adulterated and costly and these are not at all effective. The affected farmers of the district urged upon the Government for aerial spray of pesticides over the affected paddy fields.

It is learnt that the Bagerhat Agriculture Extension Department had already requested the higher authority for aerial spray. The District Officer of the Department added that some 120 plant protection squads had been formed in the district and with the help of those squads some 1,785 acres of lands were brought under control.

The insect-attack is so widespread that the matter was discussed in the last coordination meeting of the district held on September 26. The meeting requested the concerned department for aerial spray of pesticides over the affected paddy fields. It is apprehended that if necessary steps are not taken immediately the insects will do great damage to the crops of more areas.

It may be mentioned here that with a view to making up the loss of crops caused by recent floods the Agriculture Extension Department of Bagerhat district decided to bring 2,94,200 acres of land under transplanted aman crops and seedlings have already been planted in 2,89,000 acres. But according to the non-official reports, about 40,000 acres of lands are still remaining fallow for acute scarcity and high prices of paddy seedlings. It is mentionable here that aman paddy production in the district was very poor the last year due to prolonged drought, heavy rainfall and insect attack.

/9738

ZAMBIA

Council Considers 'Serious' Red Locust Threat

54000020 Harare THE FINANCIAL GAZETTE in English 9 Oct 87 p 31

[Text] Zambian Prime Minister Mr Kebby Musokotwane has called on the regional red locust control organisation council to ensure that the potential ruin to crops by huge swarms is checked as soon as possible.

Opening a meeting of the governmental council of the International Red Locust Control Organisations for Central and Southern Africa (Irlcoca), Mr Musokotwane said the threat was the most serious since the early 1940s.

Swarms had built up in South Africa and were migrating to Botswana, threatening other countries to the north.

He also disclosed that a species of locust native to the Niger Delta of West Africa had also been discovered in the region for the first time.

Already devastated by floods and drought, the region could ill-afford to lose food and cash crops to an invasion by the pest.

The 2-day meeting, attended by ministers from the region, was urged to ensure that funds invested in the council were properly used.

Mr Musokotwane also urged the council to consider expanding its activities into the control of other migratory pests dangerous to farming.

Council Chairman Mr Ndauti Kariuki—who is also Kenya's assistant minister of livestock—said despite problems, the council had continued to work successfully.

But cooperation among member states could continue being strengthened through the South African Development Coordination Conference (Sadcc) and the Preferential Trade Area (PTA), for southern and central Africa, to which they all belonged.

Irlcoca members comprise Zimbabwe, Botswana, Zambia, Malawi, Tanzania, Rwanda, Burundi, Kenya, Uganda and Zaire.

The chairman also thanked the UN Food and Agriculture Organisation and the Swiss and British governments for their help in eliminating the red locust in the region.

/12232

END